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TITLE: Determining Activities for Comparison in the community Intervention Trial for Youth (City)

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ISSUE: Determining scientifically and ethically acceptable comparison group activities is particularly complex in community-level research.

SETTING: CITY is a community-level intervention study being conducted in 13 communities to reduce HIV risk behaviors among young men (aged 15-25) who have sex with men (YMSM).

PROJECT: The CITY project will evaluate the effects of a multi-component, community-level intervention aimed at promoting safer sex behavior among white, African-American, Latino, and Asian and Pacific Islander YMSM. The trial involves 12 communities randomized to either the behavioral intervention or the comparison arms, and one community that will be treated as a case study. The communities involved in the trial were aware prior to randomization of the possibility of being in the comparison arm. In designing comparison arm activities, CITY investigators at the CDC and from the collaborating research teams consulted with two panels of external experts: The CITY External Study Group (ESG) and a panel of professional ethicists. CITY investigators also discussed these issues with their study communities.

RESULTS: The consultants from the ESG and the ethics panel reached consensus on recommended activities in CITY's comparison arm. Based on their recommendations, CITY will provide interviewed men in all sites with referrals to locally-sponsored workshops on HIV prevention skills, information on HIV prevention services available in the community, current information on HIV risk behaviors, and encouragement to consider their level of risk for HIV and to seek HIV prevention services as needed. CITY will provide collaborating community-based organizations (CBOs) with materials on local and national prevention resources, current CDC guidelines on counseling and testing and on prevention case management, information on who can help with program implementation and evaluation, and CDC's listing of effective prevention interventions. Investigators will also provide CBOs with information on the study, local epidemiological information, and eventual technology transfer of the intervention if it proves successful.

LESSONS LEARNED: The questions about comparison communities raised through this project have implications for other public health research. Researchers have a responsibility to refer survey participants in the comparison communities to program services that are considered effective. CBO partners in the comparison arm should receive a variety of benefits.

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